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## 48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

| NAME OF COMMITTEE IN FULL     Bera for Congress           |                                       |                                 | ]  |  |
|---|---------------------------------------|---------------------------------|--|--|
| ADDRESS (number and street) Post Office Box 582496        |                                       |                                 | -  |  |
| CITY, STATE, and ZIP CODE                                 |                                       |                                 | -  |  |
| Elk Grove   | CA 957                                | 58                              |  |  |
| 2. NAME OF CANDIDATE                                      | 3. OFFICE SOUGHT (State and District) |                                 | 4. FEC IDENTIFICATIO   | N NUMBER   |
| Amerish Bera  | House CA 07                           |                                 | C00461061  |  |
| 5. IS THIS AN AMENDMENT? NO, THIS IS A NEW FILING         | YES, IT AMENDS THE NOTICE FILED ON    |                                 | /  | /  |
| A. FULL NAME, MAILING ADDRESS AND ZIP CODE                | Name of Employer                      |                                 | Date (month,   | Amount   |
| CAPAC Leadership PAC                                      |                                       |                                 | day, year)   |  |
| 1126 16th Street NW #450                                  |                                       |                                 | 10/31/2012   | 2500.00  |
|   | Transaction ID : INC.F65.17690        |                                 |  |  |
| Washington DC 20036                                       | Occupation                            |                                 |  |  |
| Washington DC 20036                                       |                                       |                                 |  |  |
| B. FULL NAME, MAILING ADDRESS AND ZIP CODE                | Name of Employer                      |                                 | Date (month, day, year)                                      | Amount   |
|   |                                       |                                 |  |  |
|   |                                       |                                 |  |  |
|   | Occupation                            |                                 |  |  |
|   |                                       |                                 |  |  |
| C. FULL NAME, MAILING ADDRESS AND ZIP CODE                | Name of Employer                      | of Employer Date (month, Amount |  | Amount   |
|   | • •                                   |                                 | day, year)   |  |
|   |                                       |                                 |  |  |
|   |                                       |                                 |  |  |
|   | Occupation                            |                                 |  |  |
|   |                                       |                                 |  |  |
| FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer |                                       |                                 | Date (month, day, year)                                      | Amount   |
|   |                                       |                                 |  |  |
|   |                                       |                                 |  |  |
|   |                                       |                                 |  |  |
|   | Occupation                            |                                 |  |  |
| E. FULL NAME, MAILING ADDRESS AND ZIP CODE                | Name of Employer                      |                                 | Date (month,   | Amount   |
|   |                                       |                                 | day, year)   |  |
|   |                                       |                                 |  |  |
|   |                                       |                                 |  |  |
|   | Occupation                            |                                 | -  |  |
|   |                                       |                                 |  |  |
| SIGNATURE (optional) Rita Copeland                        | <b>DATE</b> 10/31/2012                |                                 | For further information contact: Federal Election Commission |  |
|   | [Electronically Filed]                |                                 | 999 E Street, NV   | W, Washington, DC 20463<br>-9530, Local 202-694-1100 |

Any information copied from reports and statements filed under the Federal Election Campaign Act may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes other than using the name and address of any political committee to solicit contributions from such committee.

